Case 19-07372 Doc 16 Filed 06/11/19 Entered 06/11/19 14:31:55 Desc Main Document Page 1 of 4

Eill	in this information to identify your o	000					ı				
	in this information to identify your contor 1  Abdessama	d Baba Kaidi									
	otor 2 use, if filing)					_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS								
Cas	se number 19-07372						Che	ck if this is	:		
(If known)								An amende	ed filing		
										g postpetitior ollowing date	
0	fficial Form 106l						Ī	MM / DD/ \	YYYY		
S	chedule I: Your Inc	ome									12/1
spo		ur spouse is not filing w	ith you, do not inc	lude ii	nforr	nati	on abou	t your sp	ouse. If me	ore space is	needed,
1.	Fill in your employment information.		Debtor 1					Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Franciscon and atatus	■ Employed				☐ Employed				
		Employment status	☐ Not employed				☐ Not employed				
	employers.	Occupation	Uber driver								
	Include part-time, seasonal, or self-employed work.	Employer's name	Uber								
	Occupation may include student or homemaker, if it applies.	Employer's address	182 Howard S San Francisco			-					
		How long employed t	here? 2 yea	rs				_			
Par	t 2: Give Details About Mo	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	repor	t for	any	line, writ	e \$0 in the	e space. Inc	clude your no	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the informa	tion for	all e	mple	oyers for	that perso	on on the li	nes below. If	you need
							For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$		0.00	\$	N/A	_
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	-
4	Calculate gross Income Add li	ne 2 + line 3			4	\$		0.00	\$	N/Δ	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Abdessamad Baba Kaidi	_	Case	e number (if known)	19-07	372		
Cor		y line 4 here		For Debtor 1			ebtor 2 or illing spouse N/A		
			4.	Ψ_	0.00	Ψ	IN/	<u>-</u>	
5.		all payroll deductions:	_	_					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ _	0.00	\$	N/A		
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	φ_ \$	0.00	\$	N/A		
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$—	N/A		
	5e.	Insurance	5e.	\$	0.00	\$	N/		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	A	
	5g.	Union dues	5g.	\$	0.00	\$	N/	A	
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	N/	<u>A</u>	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/	<u>A</u>	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/	<u>A</u>	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$_	1,900.00	\$	N/		
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/	<u>A</u>	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	i						
		settlement, and property settlement.	8c.	\$_	0.00	\$	N/		
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A		
	8e.	Social Security	8e.	\$_	0.00	\$	N/	<u>A</u>	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/	A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/	A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,900.00	\$	N	/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,900.00 + \$		N/A = \$	1,900.00	
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00								
12.	12. <b>Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies								
							Comb mont	hly income	
13.	Do :	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	1?						

Case 19-07372 Doc 16 Filed 06/11/19 Entered 06/11/19 14:31:55 Desc Main Document Page 3 of 4

Fill	in this informat	tion to identify yo	our case:			1						
Deb	Abdessamad Baba Kaidi					Check if this is:  An amended filing						
Deb	otor 2							howing postpetition chapter				
(Spo	ouse, if filing)				13 expenses as	of the following date:						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							MM / DD / YYYY					
	e number 19 nown)	-07372										
Of	fficial Fo	rm 106J										
		J: Your						12/				
info	ormation. If me		eded, atta	. If two married people a ch another sheet to this n.								
Par		ibe Your House	hold									
1.	Is this a join											
	■ No. Go to		in a separa	ate household?								
	No											
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	btor 2.					
2.	Do you have	e dependents?	■ No									
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state							□ No				
	dependents r	lames.					_	□ Yes □ No				
								☐ Yes				
							<u> </u>	□ No				
								Yes				
								□ No □ Yes				
3.		enses include		No			_	🗖 165				
		people other to your depende	han $_{m \Box}$	Yes								
Par		ate Your Ongoi										
exp	imate your ex enses as of a blicable date.	penses as of you	our bankri bankruptc	uptcy filing date unless y is filed. If this is a sup	you are using this f plemental <i>Schedul</i> e	orm as a s e <i>J</i> , check	the box at the to	Chapter 13 case to report p of the form and fill in the				
				government assistance								
the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)						Your expenses						
4.		r home owners d any rent for th		ses for your residence. r lot.	Include first mortgag	e 4.	\$	825.00				
	If not includ	ed in line 4:										
	4a. Real e	state taxes				4a.	\$	0.00				
		ty, homeowner's	s, or renter	's insurance		4b.	· -	0.00				
			•	ipkeep expenses		4c.	·	0.00				
5.		owner's associat		dominium dues our residence, such as ho	ome equity loans	4d. 5.	·	0.00 0.00				
٥.		ייייליים בפייפייי			oquity louis	٥.	*	0.00				

## Case 19-07372 Doc 16 Filed 06/11/19 Entered 06/11/19 14:31:55 Desc Main Document Page 4 of 4

Debtor 1 A	bdessamad Baba Kaidi	Case num	ber (if known)	19-07372
6. Utilities:	:			
6a. El	ectricity, heat, natural gas	6a.	\$	0.00
6b. W	ater, sewer, garbage collection	6b.	\$	0.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	90.00
6d. Ot	ther. Specify:	6d.	\$	0.00
. Food an	d housekeeping supplies		\$	200.00
. Childcai	re and children's education costs	8.	\$	0.00
. Clothing	g, laundry, and dry cleaning	9.	\$	25.00
0. <b>Persona</b>	Il care products and services	10.	\$	20.00
1. Medical	and dental expenses	11.	\$	0.00
2. Transpo	ortation. Include gas, maintenance, bus or train fare.			
	nclude car payments.	12.	\$	100.00
3. Entertai	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
. Charitat	ole contributions and religious donations	14.	\$	0.00
5. Insuran	ce.			
	nclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Lif	fe insurance	15a.	·	0.00
15b. He	ealth insurance	15b.	\$	0.00
15c. Ve	ehicle insurance	15c.	\$	63.00
15d. Ot	ther insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.	_		
Specify:		16.	\$	0.00
	ent or lease payments:			
	ar payments for Vehicle 1	17a.	*	0.00
	ar payments for Vehicle 2	17b.	\$	0.00
17c. Ot	ther. Specify:	17c.	·	0.00
	ther. Specify:	17d.	\$	0.00
	yments of alimony, maintenance, and support that you did not report as	40	<b>c</b>	0.00
	d from your pay on line 5, Schedule I, Your Income (Official Form 106l).	18.		
•	ayments you make to support others who do not live with you.		\$	0.00
Specify:	al manufacture and the first all all all and the first and the form and the first all all all all all all all all all al	19.		
	all property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
	operty, homeowner's, or renter's insurance	20c.	· -	0.00
	aintenance, repair, and upkeep expenses	20d.	·	0.00
	omeowner's association or condominium dues	20e.	·	0.00
. Other: S	Specify: School Expenses	21.	_+\$	358.00
. Calculat	e your monthly expenses			
	I lines 4 through 21.		\$	1,681.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		s —	1,001.00
				4 004 00
∠∠C. Add	l line 22a and 22b. The result is your monthly expenses.		\$	1,681.00
3. Calculat	e your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,900.00
	ppy your monthly expenses from line 22c above.	23b.	·	1,681.00
			·	
23c. St	ubtract your monthly expenses from your monthly income.			
	ne result is your monthly net income.	23c.	\$	219.00
For exam	expect an increase or decrease in your expenses within the year after you ple, do you expect to finish paying for your car loan within the year or do you expect your on to the terms of your mortgage?			ease or decrease because of a
	Cyplain have			
Yes.	Explain here:			